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## FACSIMILE TRANSMISSION

TO: Commissioner for Patents

FROM: Chad E. Bement  
3547

Examiner Hargobind S. Sawhney  
Patent Examining Corps  
Facsimile Center  
Washington, D.C. 20231

F&L REF. NO.: 035451-0145 (3682.Palm)

Total pages, including cover letter: 17

PTO FAX NUMBER (571) 273-8300

If you do NOT receive all of the pages, please telephone us at (414) 297-4971, or fax us at (414) 297-4900.

Title of Documents Transmitted: **Amendment and Reply Under 37 CFR 1.116**

Applicants: Hanson et al.  
Appl. No.: 09/989,273  
Filing Date: 11/20/2001  
Art Unit: 2875  
Atty. Dkt. No.: 035451-0145 (3682.Palm)

By: Chad E. Bement  
Name: Chad E. Bement  
Reg. No.: 54,991

I hereby certify that this paper is being transmitted by facsimile to the U.S. Patent and Trademark Office on the date shown below.

11-22-05  
Date

Roberta A. Cooper  
Roberta A. Cooper

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NOV 22 2005

Atty. Dkt. No. 035451-0145 (3682.Palm)

***IN THE UNITED STATES PATENT AND TRADEMARK OFFICE***

Applicant: Hanson et al.

Title: NON-VISIBLE LIGHT DISPLAY  
ILLUMINATION SYSTEM AND  
METHOD

Appl. No.: 09/989,273

Filing Date: 11/20/2001

Examiner: Sawhney, Hargobind S.

Art Unit: 2875

|   |
|---|
| <p><b>CERTIFICATE OF FACSIMILE TRANSMISSION</b></p> <p>I hereby certify that this paper is being facsimile transmitted to the United States Patent and Trademark Office, Alexandria, Virginia on the date below.</p> <p><u>Roberta A. Cooper</u><br/>(Printed Name)</p> <p><u>Roberta A. Cooper</u><br/>(Signature)</p> <p><u>11/22/05</u><br/>(Date of Deposition)</p> |
|---|

**AMENDMENT TRANSMITTAL**

Mail Stop AF  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an amendment in the above-identified application.

☒ Amendment and Reply Under 37 CFR 1.116 (14 pages).☒ The fee required for additional claims is calculated below:

|  | Claims<br>As<br>Amended |   | Previously<br>Paid For |   | Extra<br>Claims<br>Present |   | Rate     |   | Additional<br>Claims Fee |
|--|-------------------------|---|------------------------|---|----------------------------|---|----------|---|--------------------------|
| Total Claims:  | 23                      | - | 27                     | = | 0                          | x | \$50.00  | = | \$0.00                   |
| Independent<br>Claims:                               | 3                       | - | 3                      | = | 0                          | x | \$200.00 | = | \$0.00                   |
| First presentation of any Multiple Dependent Claims: |                         | + |                        |   |                            |   | \$360.00 | = | \$0.00                   |
| CLAIMS FEE TOTAL                                     |                         |   |                        |   |                            |   |          |   | = \$0.00                 |

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-1-

Application No. 09/989,273

Atty. Dkt. No. 035451-0145 (3682.Palm)

- ☐ Applicant hereby petitions for an extension of time under 37 C.F.R. §1.136(a) for the total number of months checked below:

|  |            |        |
|--|------------|--------|
| <input type="checkbox"/> Extension for response filed within the first month:  | \$120.00   | \$0.00 |
| <input type="checkbox"/> Extension for response filed within the second month: | \$450.00   | \$0.00 |
| <input type="checkbox"/> Extension for response filed within the third month:  | \$1,020.00 | \$0.00 |
| <input type="checkbox"/> Extension for response filed within the fourth month: | \$1,590.00 | \$0.00 |
| <input type="checkbox"/> Extension for response filed within the fifth month:  | \$2,160.00 | \$0.00 |
| EXTENSION FEE TOTAL:   |            | \$0.00 |
| <input type="checkbox"/> Statutory Disclaimer Fee under 37 C.F.R. 1.20(d):     | \$130.00   | \$0.00 |
| CLAIMS, EXTENSION AND DISCLAIMER FEE TOTAL:                                    |            | \$0.00 |
| <input type="checkbox"/> Small Entity Fees Apply (subtract ½ of above):        |            | \$0.00 |
| TOTAL FEE:   |            | \$0.00 |

- ☒ The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 06-1447. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 06-1447. If any extensions of time are needed for timely acceptance of papers submitted herewith, applicant hereby petitions for such extension under 37 C.F.R. §1.136 and authorizes payment of any such extensions fees to Deposit Account No. 06-1447.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date

11/22/2005

By

Chad E. Bement

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Chad E. Bement  
 Attorney for Applicant  
 Registration No. 54,991

NOV 22 2005

Atty. Dkt. No. 035451-0145 (3682.Palm)

***IN THE UNITED STATES PATENT AND TRADEMARK OFFICE***

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|--|

**AMENDMENT AND REPLY UNDER 37 CFR 1.116**Mail Stop AF  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

This communication is responsive to the Final Office Action dated August 24, 2005,  
concerning the above-referenced patent application.

**Amendments to the Claims** are reflected in the listing of claims which begins on page 2  
of this document.

**Remarks/Arguments** begin on page 6 of this document.

Please amend the application as follows: